

**Family Support Council Meeting
December 2, 2022
Zoom Meeting
Meeting Minutes**

Members present: Amber Finnesand, Christine Kenser, Krista Bau, Bridget Leiseth, Pat Norin, Krista Johnson, Brittany Norin, Jennifer Walker, Joanne Hairy Shirt, Janet Whiting, Peggy Waltner, Dianne Baumiller, Michelle Powers

Members absent: None

DHS Staff: Jaze Sollars, Kade Anderson, Joey Younie, Jenna Howell, Shawnie Rechtenbaugh

I. Call to Order

Amber called the meeting to order at 6:01pm CT.

II. Introductions

What do we do for self-care? Members of the Council and DHS Staff responded to what they did for self-care.

III. Approval of Minutes

Dianne made a motion to approve the previous minutes with the change of Pat needing removed from being present and Michelle seconded. Approval of minutes passed with a voice vote.

IV. Standing Items

A. Grievances and Appeals – The State has no appeals at this time that have been finalized.

B. SMART Data – An overview of the SMART system was given to new council members. The state defined what a performance measure was. Reviewing a random sample of participants. Services that they are receiving. June 1, 2021 – May 31, 2022 for H&W and S&P were for the entire waiver year. 86% is the threshold that the federal government likes to see. Specific attention is given to areas that don't meet 86%. H&W had no areas falling below 86%. S&P had two elements that fell below 86%, initial assessment and ISP monitoring. For the last quarter data, H&W had one area fall below 86%. There were only 4 files applicable and one of those were incorrect. S&P There were no areas that fell below 86%.

C. ALJ – None to report.

D. Open Council Positions – We have two open positions. Ultimately appointments are made by the Governor's Office. The Division of Developmental Disabilities (DDD) has not received any new appointments from the Governor's Office.

V. Open Meeting Expectations

Shawnie Rechtenbaugh the Cabinet Secretary of the Department of Human Services (DHS) who was appointed by Governor Noem gave information on DHS. Shawnie talked about the executive order that was created that defined the Family Support Council. The general provisions of the executive order were reviewed. The executive order can be amended if the number of outgoing members gets out of balance. More information is needed on the duty of providing an annual report to the Governor and Legislature. It stays in effect unless the Governor rescinds the executive order. As members of an advisory council, part of the role as a council member is not necessarily to represent yourself but other families who may be on family support. Reference to

codified law chapter 1-25 Meetings of Public Agencies was briefly discussed. Public comment, agenda and minutes. 1-25-1.3 has information on meeting notices and draft agendas. The agenda shall be posted 72 hours in advance on the Boards and Commissions website, physical location and sent to members. 1-25-3 minutes are also required and are posted to the Boards and Commission website. Public Comment 1-25-1 you are doing well that you have it on the agenda. You have flexibility on where it will be on the agenda. Can have multiple areas of public comment. A recommendation was made by Shawnie to not limit the time length of public comment. Possibly, use the word approximate so there is no set time to it. The format of the meeting should be that all questions should run through the chair. Can we ask questions to the public? Can we touch base with members of the public who have asked questions?

The question was asked, what is your vision of the Council and the Division? The vision of the Family Support Council is that it isn't going anywhere. In the next 6 months your agenda will get easier and the role of chair should get easier.

VI. South Dakota Legislature

Recently, at GOAC and appropriations legislature committees Family Support was on the agenda. At appropriations on November 10th, it was on the agenda. Some public also spoke that day. October 18th DD spoke on the 19th the public spoke. A legislative workgroup was created by the legislature and Family Support was discussed. The workgroup was made of DD staff, members of the legislature, families and CSPs. It occurred in Sioux Falls and was 4 ½ hours long. Items relevant to Family Support were shared by Medicaid staff. Discussed what hardships some families were having. How were people selected for the workgroup? Not entirely certain how family members were selected as that was done by the legislature. Background on the workgroup? Some of this was reactive to the different testimonies in GOAC and appropriations. Basically, they wanted to try and find solutions and pulled a workgroup together to try and get things done. Chair of appropriations went to Michelle for suggestions for parents. First remediation was communication and that families are engaged in meaningful conversation. Members are given the opportunity for meaningful feedback. The waitlist was the second one. The third point was a policy analyst. Financial assistance guidelines are tied to waiver and rule. Also looking at the 20-hour work week and compliance. The 4th point was companion and respite care. These formed the main points of why the workgroup was formed.

Good conversation was had at the workgroup meeting. An item that was discussed were weekly claims instead of monthly claims. On the remediations list, on the waitlist, we will be in compliance with administrative rules. There is funding for another program to be added. A community support provider would need to add another program Family Support program. We would need family support providers to be willing to expand. The money isn't the issue. Workforce is a tough issue and probable factor. There could be a fair number of things that would need to be considered as a business. We have successfully expanded family support in the past, Benchmark Human Services is the main provider that has been expanding. DDD would love to add more programs. A request was made to add limits on waiver services as an agenda item on future meetings.

One thing around the agency with choice (awc) issue is that there is a requirement they remain an employee of that agency for 12 months. Wondering if people are going more than 6 months without working? One thought is college or high school students that have dropped off after 2-3 months. Fear based that if you let your person go or fall off the list you may never get that person back on the list due to limitations with agency with choice. It can be difficult to hire someone with the awc model. A question posed by the Council, are there limits to the number of providers a family could have? DDD advised they would look at this further. DDD does have an upcoming meeting with their CSPs and financial management services could be looked at further.

What is the process for the division to expand another family support program? Typically, it is a more organic conversation. The provider inquires with DDD. What challenges does the CSP have in adding an additional family support program? Teri Bukowski with Benchmark advised that they

have been lucky with adding programs. It is not easy. The challenge is finding staff and keeping good staff. We have been building a planning list since day 1. Some CSPs no longer take applications. The front door will make it easier to enter DDD services. What holds Benchmark back is staffing. Not finding the families or getting applications through, it is finding good staff. Michelle proposed making this agenda topic a standing agenda item for future meetings.

VII. Public Comment

Tina makes a motion to go into recess and Michelle seconded the motion. Recess passes with a voice vote.

Janet, Brittany, Michelle are now absent at the start of day two.

VIII. American Rescue Act Plan Update

This has been on the agenda for some time now. An overview of ARPA funds was given to the council. Those funds do go to the providers. One of the council member's providers received a bonus check for working during COVID. LifeQuest did advise DDD that they would be funneling those payments to direct care providers. Some of those bonus checks were a couple of hundred dollars. Providers have through 2023 to spend the funds that they received.

IX. Waiver Renewal

DDD shared the Family Support 360 waiver was finally approved by CMS. This includes the additions of the specialized therapy services. They have approval from CMS for those specialized services. DDD is now working with the Department of Social Services to finalize the details of offering the specialized therapies waiver service. They are hoping to have a start date around January. A question was posed by the council on the time frames of waivers. Generally, how the process works is that the first draft gets submitted and then CMS requests more information and that process will continue for a couple times. Waivers are approved for a 5-year cycle. The State can amend the waiver during that 5-year cycle.

X. Common Law Employer

DDD does have a meeting with providers next week about the Common Law model. Medicaid dollars need to filter through a Medicaid provider. The process needs an intermediary who can distribute payments to providers. We currently have 5 financial management service providers. Right now, we have a co-employer model. The CSP is the employer of record. The common law option doesn't change the AWC model. The common law option instead of the CSP being the employer the family becomes the employer. This option allows a family to hire someone and not have to worry about providing benefits. This would allow families to go over the 20-hour cap. Liability does become a concern with the common law option.

A question was asked by the Council on how much paperwork will there be for families? How much time are families going to have to do spend with this model? Some of those details will still need to be provided. There will be paperwork involved with the common law model. It is nice for families to have other options. How does this compare to an independent contractor? Providers would not qualify as an independent contractor after discussions with the Department of Labor. Ohio has a common law model and Jaze can follow up on details of success rates.

Adding the common law option was our first step in addressing some of the concerns we have seen around family support. We are still considering other options and working towards finding other solutions. There are 3 methods of delivering care services. The agency provides the services, common law, and the co-employer model. Are there resources to help with the paperwork? DDD advised that there will be resources available to help families with the common law model. DDD could look at options about someone being a representative. A question was asked about minimum wage laws? Guidance on minimum wage laws and fair labor standards, discrimination, and abuse are all being looked at. The limitation of 20 hours for providers has really affected Teri Bukowski's family. The liability issue could be a real problem for some families. What is the liability risk for her family and what does that look like.? Family Support

Coordinators will need to be educated on the common law model and Pat advised that you would need to adjust your home owner insurance policy.

XI. State Meeting Updates

A. Community of Practice – Very few people with a disability attend and a limited number of family members. There is pretty good turnout by public and private partner and DDD staff. DDD does not want as many DDD staff on the meetings. They want to see more families and individuals. They want to promote dialogue between families and the state systems. Would like to see more engagement of family members in the COP for Supporting Families. Streamline information and resources to provide better access to families.

B. Ambassador – New session starting in January and information was shared with the council.

C. Affinity Groups – Survey results were gone over. Determining how and by whom groups will be facilitated and identifying volunteers interested in each topic.

D. Family & Self-Advocates – Very strong beginning conversations and it has tapered off as the meetings have went along. We do want to intentionally interact with self-advocacy groups. Registration is required and we have a couple people who have affiliation with advocacy organizations. We did evening session and a lunchtime session in 2022 we paired that down to one session. The meetings are all virtual. Stakeholder collective would be a larger gathering of DDD providers and partners. Stake holder collective most of the representation is by providers and DDD staff.

Is the frequency monthly or quarterly? On the listserv things get sent to too many people. Is there a way to say hey our letter went out so families can be aware? Families may lose the emails to their junk mail. How to translate webpage and phone calls was discussed. Are there are other resources out there to translate zoom meetings? Prioritization of what to communicate. Great idea to have that on the website. Monthly would be good. In the interim if you have question's please reach out to DDD.

XII. Front Door to Support Work Group

DDD has been working with the work group since June. Collaboration between division staff, family members, and providers. The workgroup has 6 family members, some have dual roles. DDD feels like it has been very collaborative. The workgroup has talked about the application process. Most recently they have been working on an application guide. DDD has really appreciated all of the feedback they have received from other members of the workgroup. They are finalizing the process and what the system will look like. There have been some very good conversations. Looking at it from a provider perspective they like the idea of tracking the status of the application.

XIII. Participant Served Map and Family Support Provider Agencies Map

Are there other ways to obtain this information? The number of individuals being served should be regionalized. Where are people located who are on the planning list was one piece of information that the council was requesting to see. The council will need to figure out what information they are needing and what information the maps are providing.

XIV. Planning List

1298 Total Participants with 183 individuals on a planning list. Total number of participants decreased by 5 and the number of people on a planning list increased by 4.

LifeQuest is currently serving 190 participants and has 47 people on their planning list. LifeQuest is serving 1 more participant than last quarter. LifeQuest's planning list has increased by 11 individuals.

Dakota Milestones is currently serving 38 participants. Dakota Milestones closed their west central program and Benchmark opened a new program to cover the west central region. They have 19 individuals on their planning list.

SESDAC is currently serving 121 participants and has 56 people on their planning list. SEDDAC's planning list has increased by 5 since August with the majority of those in the Sioux Falls area. 2/21/2021 is the longest someone has been on their planning list.

Benchmark is currently serving 296 participants and has 81 people on their planning list with 44 of those in the southeast portion of the state. This has increased by 1 since August of 2022.

HACFI is currently serving 79 participants and has 13 people on their planning list. The planning list has decreased by 2.

VOA is currently serving 168 participants and has 65 people on their planning list. This has increased by 4 since August of 2022.

LifeScope is currently serving 147 participants and has 21 people on their planning list. The planning list has increased by 1.

BHSSC is currently serving 258 participants and has 14 people on a planning list. They do have openings in the central part of the state but there is a wait in the western part of the state.

General Trends

- Dakota Milestones has closed one of their family support programs. Those participants receiving services with that program were dispersed between already active programs and the new program that Benchmark Human Services created.
- Numbers have remained relatively even across the board.

Break for 10 minutes until 10:40CT.

XV. ISP (Individual Support Plan)

New ISP format went into effect in July. DDD staff and family support coordinators are still learning on creation and family involvement with the ISP process. From a regulatory perspective, the HCBS settings rule had components that related to person centered service planning practices. In 2014 the Centers for Medicaid and Medicare Services (CMS) set a standard for what HCBS meant. While individuals had been receiving services in the community, there were not a lot of rights for individuals. CMS set some standards on person centered service planning. There were certain criteria that needed to be met in an ISP. DDD went into a contract with UMKC and how our ISP would look. There was stakeholder involvement in that process. There was a workgroup that went over the ISP template and this was piloted by families. Training was done with case managers and service coordinators. In the past family support was very service driven. It was easier to implement this in Family Support and DDD piloted it again for families in Family Support. That was how DDD went through the development process and rolling the ISP out for all families.

What is the practical application of this ISP? This leads to a longer annual meeting. We are developing additional tools to help families and coordinators prepare for these ISP meetings. DDD does receive feedback from coordinators on how families are handling the new ISP. Now the ISP looks different. DDD does have an RFP out for a unified case management system. Goals are what show in FOCOS but these are really services. Tina advised that the ISP was very Charling the LifeCourse focused. She also advised the ISP was longer but it did make you think through some future situations for your significant other. Tina advised it was a positive change. Pat advised it took about 3 hours to complete. Pat could envision that for some families this could take double the amount time. DDD's hope is for people to start thinking about services and supports in a different way. Build up a way to help identify where there might be gaps so we can fill services in those gaps to prevent possible crises in the future. As families get more familiar

with the new ISP format, the hope is that as families become more familiar the time for the meeting takes less. Family Support Coordinators do have the option to break up the meetings into sections.

XVI. Amend the By-Laws – 1st Reading of when the meeting agenda needs to be published

There are several things in the by-laws that should be corrected. The by-laws should not be in conflict with state law. Ex-officio members should not be in place. What DDD can offer is that they can markup the current by-laws and suggest edits and then bring it to the next meeting. There is nothing in the by-laws stating that we need multiple readings. Pat makes a motion to delay discussion on the by-laws until the next meeting. Peggy seconds the motion. Motion passes with a voice vote.

XVII. DD Council

Arlene gave an update about the DD Council.

Wednesday February 22nd is disability day at the Capitol. Arlene will be sending out a registration form to different disability organizations. They set up booths in the rotunda and they offer fruit cups. It goes from 9am to 1pm. While the organizations are there, there is socialization with members of the legislature.

The DD Council has a goal in the area of mental health. The DD Council has a contract with the University of New Hampshire and they are doing an assessment for the services of people with ID/DD. That is getting started in January. Also, as part of that there will be a professional meeting group. Cross training on mental health has been a need that has been identified. There will be some training for DD providers.

Coming up the DD Council will have openings and they will be looking for new members. Information will be sent out in January and February. The council has 25 members and there are usually about 5 members whose term is ending.

XVIII. Public Comment Period

Carrie G. just here to listen.

Arlene thought a guide for the application process is a good thing. Make it in plain language. Has a guide for plain language available.

Arlene advised when she switched her council's agenda there was more understanding on what was coming up. It seemed to be clearer and less questions on why it got on the agenda. The time keeps people a little bit more on task.

Tina advised that she likes the flow of the agenda better. Advised she really likes the current format of the agenda.

Bridget agrees with Tina. Likes the desired outcome portion and lets her think through topics. Bridget appreciates the current agenda format.

XIX. Council Discussion

What is something that you appreciated from today's meeting? DHS staff and council members told something they appreciated from the meeting.

XX. Next Meeting

Jaze gave an update on travel reimbursement. Historically council members have been provided a stipend. The council needs to transfer to a per-diem type reimbursement. Distance and hotel rooms for example, if the meeting is in Aberdeen and you live in Aberdeen you would not receive a hotel room. If there are individual scenario's we can work through those on a case-by-case basis.

Discussion was had on moving timeframes of meetings. Most members like the meetings as they currently are. Quarterly and on Friday and Saturday night.

Tentative future meeting dates would be March 10th and 11th in Rapid City, June 9th and 10th in Aberdeen, September 8th and 9th in Sioux Falls, December 1st and 2nd in Pierre.

XXI. Adjournment

Peggy made a motion to adjourn the meeting at 12:16 PM CT, Krista Johnson seconded the motion. The motion passed with a voice vote.

X

Krista Bau
Secretary